

**Initial Application Data Sheet**



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**Application Information**

Application Number::	Unassigned
Filing Date::	October 27, 2003
Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R::	None
Title::	COMPUTER ASSISTED AND/OR IMPLEMENTED PROCESS AND SYSTEM FOR ANNOTATING AND/OR LINKING DOCUMENTS AND DATA, OPTIONALLY IN AN INTELLECTUAL PROPERTY MANAGEMENT SYSTEM
Attorney Docket Number::	113708.129 US1
Request for Early Publication?::	No
Request for Non Publication?::	Yes
Total Drawing Sheets:	24
Small Entity?::	Yes
Petition Included?::	No
Secrecy Order in Parent Application?::	No

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	U.S.
Status::	Full Capacity
Given Name::	Eugene
Middle Name::	M.
Family Name::	Lee
City of Residence::	McLean
State or Province of Residence::	Virginia
Country of Residence::	U.S.

Street of mailing address:: 1237 Providence Terrace  
City of mailing address:: McLean  
State or Province of mailing address:: Virginia  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 22101

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Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.  
Status:: Full Capacity  
Given Name:: Dietmar  
Middle Name:: C.  
Family Name:: May  
City of Residence:: Ashburn  
State or Province of Residence:: Virginia  
Country of Residence:: U.S.  
Street of mailing address:: P.O. Box 298  
City of mailing address:: Ashburn  
State or Province of mailing address:: Virginia  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 20146

**Correspondence Information**

Correspondence Customer Number:: 24395  
Phone number:: 202-942-8400  
Fax number:: 202-942-8484

**Representative Information**

Representative Customer Number::	24395	
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**Domestic Priority Information****COPY**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This application	Continuation-in-part	10/229,273	August 28, 2002
10/229,273	Non-provisional	60/315,021	August 28, 2001

**Assignment Information**

Assignee Name:: Knowledge Management Objects, LLC  
Street of mailing address:: 8200 Greensboro Drive, Suite 1525  
City of mailing address:: McLean  
State or Province of mailing address:: Virginia  
Country of mailing address:: U.S.  
Postal or Zip Code of mailing address:: 22102